## DLN: 93493015012011

OMB No. 1545-0047

2019

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury

**Return of Organization Exempt From Income Tax** 

▶ Do not enter social security numbers on this form as it may be made public.

 $\blacktriangleright$  Go to  $\underline{\textit{www.irs.gov/Form990}}$  for instructions and the latest information.

Open to Public Inspection

	1 100 VC			min a 07 01 2010 and andin a 06	20 2020					
			C Name of organization	ning 07-01-2019 , and ending 06-	30-2020		D Employ	or ident	tification	number
		pplicable: change	The Center for Reproductive Rights	Inc						· · · · · · · · · · · · · · · · · · ·
	me ch	, i	% LAURA PEROZO				13-366	9/31		
	tial ret		Doing business as							
		n/terminated d return		ail is not delivered to street address) Room/	cuito	I	E Telepho	ne numb	er	
		on pending	100 Water Street 22nd floor	an is not delivered to street address/ Room/	suite		(917) 6	37-360	10	
			City or town, state or province, cour	ntry, and ZIP or foreign postal code			(31/)	,5, 500		
			New York, NY 10038	,,			<b>G</b> Gross re	eceipts \$	38.755.7	'66
			<b>F</b> Name and address of principa	al officer:	H(a)	Ic thic	a group re		-	
			NANCY NORTHUP		"(")		a group re inates?	tuili lo		]Yes <b>☑</b> No
			199 Water Street 22nd floor New York, NY 10038		H(b)		subordina	tes	_	Yes No
[ Ta:	x-exen	npt status:		(insert no.) 4947(a)(1) or 527	ı	include		l:-+ /		
	- 174			(Insert no.)			' attach a exemptior	•		ctions)
, vv	ebsit	:e:▶ ww	w.reproductiverights.org		(5)	Group	exemption	Hullibe	=1 -	
V Earr	n of or	rannization	: 🗹 Corporation 🗌 Trust 🔲 Asso	ciation Other	<b>L</b> Year o	of format	ion: 1992	M Stat	e of legal	domicile: DE
N FOII	11 01 01	rganization	: 🗷 Corporation 🗀 Trust 🗀 Asso	clation					_	
Pa	art I	Sum	mary					ı		
			scribe the organization's mission o							
<b></b>			ER FOR REPRODUCTIVE RIGHTS L ROUND THE WORLD.	JSES THE POWER OF LAW TO ADVANCE	E REPRODI	UCTIVE	RIGHTS A	S FUND	DAMENT	AL HUMAN
Ě	-	(IOIIIO A	NOOND THE WORLD.							
e E	-									
₹	-									
3				scontinued its operations or disposed of ng body (Part VI, line 1a)			of its net a	assets. 3	. 1	21
×ಶ ಿ			•	the governing body (Part VI, line 1b)				4		20
Activities & Governance	l		•	lendar year 2019 (Part V, line 2a)				5		208
			, ,					6	_	847
AC	l		nber of volunteers (estimate if ned	•		_				
	l			VIII, column (C), line 12				7:	_	
	Ь	Net unrei	ated business taxable income from	n Form 990-T, line 39	<del></del>			71		
	_					Prio	r Year	202	Curre	ent Year
알	l		ions and grants (Part VIII, line 1h)			33,084,			29,380,34	
Rəvenue	l	-	service revenue (Part VIII, line 2g)				0			
Ğ.			ent income (Part VIII, column (A), I			761,			180,05	
	l		venue (Part VIII, column (A), lines			1,317,			2,318,75	
			<u> </u>	st equal Part VIII, column (A), line 12)			35,162,			31,879,148
	l		nd similar amounts paid (Part IX, c				562,984			352,58
	l		paid to or for members (Part IX, co	•				0		
8			, , ,	enefits (Part IX, column (A), lines 5–10)			22,259,			24,695,40
ens	<b>16</b> a	Professio	onal fundraising fees (Part IX, colur	mn (A), line 11e)			289,	210		405,49
Expenses	l		raising expenses (Part IX, column (D),	·						
ш	17	Other exp	penses (Part IX, column (A), lines	11a-11d, 11f-24e)			11,369,	845		10,705,23
	18	Total exp	enses. Add lines 13–17 (must equ	ıal Part IX, column (A), line 25)			34,481,	785		36,158,71
	19	Revenue	less expenses. Subtract line 18 fro	om line 12			680,	671		-4,279,568
Net Assets or Fund Balances					Begi	inning o	f Current \	/ear	End	of Year
alan S	20	Total acc	ets (Port V. line 16)				48,198,	602		46,593,489
A B			ets (Part X, line 16)							
ڲؚڿ			ilities (Part X, line 26)				2,816,			5,734,578
			s or fund balances. Subtract line 2	zi irom line zo			45,382,	050		40,858,91
	rt II r pena		<b>ature Block</b> eriurv. I declare that I have exam	ined this return, including accompanyir	na schedul	es and	statement	s. and t	o the be	est of my
knowl	edge	and belie		. Declaration of preparer (other than of						
any k	nowle	edge.								
		*****	*			2021	-01-13			
Sign		Signati	ure of officer			Date				
Here		NANCY	NORTHUP president/ceo							
			r print name and title							
		P	rint/Type preparer's name	Preparer's signature	Date	C1.		PTIN		
Paid	t					- 1	k ∐ if employed	P007414	91	
	pare	er 🕝	irm's name				s EIN 🕨			
	On	<u> </u>	irm's address ► 100 PARK AVENUE			Dhan	e no. (212)	885-000	ın	
		·   [		E001		Filon	C 110. (ZIZ)	JUJ-80U		
			NEW YORK, NY 10017							
May t	he IR	S discuss	this return with the preparer show	vn above? (see instructions)				. ⊻	Yes L	J No

Form	990 (2019)					Page <b>2</b>				
Pa	rt III Statemen	t of Program Servi	ce Accomplis	hments						
	 Check if Sch	edule O contains a resp	onse or note to a	any line in this Part III		🗹				
1	Briefly describe the	organization's mission:								
SEE :	SCHEDULE O									
2	Did the organization									
	the prior Form 990	or 990-EZ?				☐ Yes 🗹 No				
	If "Yes," describe th	nese new services on Sc	hedule O.							
3	Did the organization									
	services?									
	If "Yes," describe th	nese changes on Schedu	ıle O.							
4	Section 501(c)(3) a		ons are required	to report the amount	e largest program services, as meas of grants and allocations to others,					
4a	(Code:	) (Expenses \$	11,520,466	including grants of \$	0 ) (Revenue \$	0)				
	See Additional Data									
4b	(Code:	) (Expenses \$	8,720,542	including grants of \$	352,584 ) (Revenue \$	0)				
	See Additional Data									
4c	(Code:	) (Expenses \$	6,675,967	including grants of \$	0 ) (Revenue \$	0)				
	See Additional Data									
4d	Other program serv									
	(Expenses \$	inc	luding grants of	\$	) (Revenue \$	)				
4e	Total program se	rvice expenses >	26,916,9	75						
4e	Total program se	rvice expenses ▶	26,916,9	75		Form				

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Par	Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D,Part   2	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V 🕏	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		No
13		13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No

orm !	990 (2019)			Page <b>4</b>
Par	Checklist of Required Schedules (continued)			
_			Yes	No
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J </i>	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
•	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M **	29	Yes	
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
<u> </u>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
ŀ	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
ia	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
5	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
8	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Par	Statements Regarding Other IRS Filings and Tax Compliance	'		
	Check if Schedule O contains a response or note to any line in this Part V			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a   129		Yes	No

1b

 $\boldsymbol{b}$  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  $\,$  .

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

**1**c

Yes

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage <b>3</b>					
	Enter the number of employees reported on Form W-3, Transmittal of Wage and								
Za	Tax Statements, filed for the calendar year ending with or within the year covered by this return								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No					
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b							
_	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If "Yes," enter the name of the foreign country:   KE, CO, NP, WZ	4a	Yes						
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No					
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c							
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6</b> b							
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes						
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No					
d	If "Yes," indicate the number of Forms 8282 filed during the year								
e	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?								
f	${f f}$ Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?								
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?								
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a							
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
а	Initiation fees and capital contributions included on Part VIII, line 12 10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders								
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	Is the organization licensed to issue qualified health plans in more than one state?	13a							
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans								
c	Enter the amount of reserves on hand								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No					
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No					

Ollin	990 (2019)			Page <b>0</b>
	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	respo	nse to i	ines  ✓
Se	ction A. Governing Body and Management		<b>V</b>	
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   21		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 20			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	_	<u> </u>	
<u> </u>	ction b. 1 oncies (17113 Section B requests miorination about policies not required by the Internal Neventa		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed▶			
	'´			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:  LAURA PEROZO 199 WATER STREET 22ND FLOOR new york, NY 10038 (917) 637-3604			

Name and title

Part VII

and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII .

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

 $\checkmark$ 

(F)

Estimated

amount of other

compensation

from the

Reportable

compensation

from related

organizations

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the

organization and any related organizations.

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (A) (C) (B) (D) (E)

Position (do not check more

than one box, unless person

is both an officer and a

director/trustee)

Reportable

compensation

from the

organization

Average

hours per

week (list

any hours

	for rolated			, .		,		(14/ 2/1000	(1)/ 2/1000	organization and
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
See Additional Data Table										

169,091

161,613

Form **990** (2019)

	990 (2019)													Page <b>o</b>
Par	t VII Section A. Officers, Direc	tors, Trustees	, Key ا	<u>Emp</u>	loye	es,	and	High	est Co	mpensa	ted Employees	(conti	inued)	
	<b>(A)</b> Name and title	(B) Average hours per week (list any hours for related   Comparison   Comparison						from related organizations	5	Estima amount o compens from	ated of other sation the			
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		2/1099- IISC)	(W-2/1099- MISC)		organizati relat organiza	:ed
See /	Additional Data Table		-	$\vdash$	-	$\vdash$	_ <u>~</u>	H				+		
		+		$\vdash$		H		H				+		
			<u> </u>	igsqcup	<u> </u>							4		
			<u> </u>	$\vdash$	-	<u> </u> -						+		
		-	<u> </u>	$\vdash$	-	$\vdash$	_					+		
		-		$\vdash$		$\vdash$		$\forall$				+		
		+				$\Box$						$\top$		
c T	Sub-Total	Part VII, Section	Α.				<b>*</b> _		2,	,892,415		0		409,251
2	Total number of individuals (including of reportable compensation from the	g but not limited	to thos				e) who	rece	eived mo	ore than	\$100,000	•		
	·												Yes	No
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule</i>										ed employee on	3		No
4	For any individual listed on line 1a, is organization and related organization													
_	individual											4	Yes	<u> </u>
5	Did any person listed on line 1a recei services rendered to the organization									• •	ndividual for	5		No
Se	ction B. Independent Contract	tors												
1	Complete this table for your five high from the organization. Report compe	nest compensate										npens	sation	
		(A)		<del></del>			-	-			(B)		(C	
	ita, B Data drive	and business addre	<u> </u>								escription of services L CONSULTING	$\dashv$	Comper	559,498
Blackb PO Bo	x 930256									Software		$\dashv$		260,820
Enid M	NTA, GA 31193 Muthoni Ndiga, RESIDENCES GITHUNGURI ROAD									CONSULT	ING	+		183,070

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

CONSULTING

Computer Services

NAIROBI, 0 KE Berlin Rosen, 15 Maiden Lane Suite 1600

compensation from the organization ▶ 10

COZY RESIDENCES GITHUNGURI ROAD NEW YORK, NY 10038

Netsurit Inc, 247 West 30th Street NEW YORK, NY 10001

orm 9 Part		Statement								Page <b>9</b>
		Check if Sched	dule	O contains a	respo	onse or note to any	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
(6	1a	Federated campa	aigns	5	1a			revenue		512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership due	s.	. [	<b>1</b> b					
0 110 110 110 110 110 110 110 110 110 1	С	: Fundraising even	nts .	[	1c	543,873				
Ē,Š	d	Related organiza	tions	s [	1d					
n <u>∃</u> 6:	е	Government grants	(con	tributions)	1e					
Sin	f	All other contribution								
uti Per		above		L	1f	28,836,469				
흕호	g	Noncash contribution lines 1a - 1f:\$	ns in	ncluded in	<b>1</b> g	3,292,509				
in di	h	<b>1 Total.</b> Add lines	1a-1	.f		•				
<u> </u>						Business Code	29,380,342			1
	2a									+
e										
Ne l	b									
⊕ ⊕										
vic.	С									
₹	d									
Program Service Revenue										
<b>₹</b> og	е									
	f	All other program	serv	ice revenue.						
	g	Total. Add lines 2	2a-2	2f	<b>&gt;</b>	0				
	3 I	nvestment income	(inc	luding divide		nterest, and other	334,775			334,775
		imilar amounts) . ncome from invest		t of tay-eyen	· nnt h	ond proceeds				334,773
						•				
		•		(i) Real		(ii) Personal				
	62	Gross rents	6a				1			
		Less: rental	L a				$\dashv$			
		expenses	6b							
		Rental income or (loss)	6c		(		0			
	d	Net rental income	e or	(loss)			-			
				(i) Securit	ies	(ii) Other				
	7a	Gross amount from sales of	7a	6.3	72,069		0			
		assets other than inventory		-,-	,					
	b	Less: cost or	<b></b>		40.70					
		other basis and sales expenses	7b	6,5	18,730	8,05	9			
	_	Gain or (loss)	7c	-1	46,661	-8,05				
		Net gain or (loss)			• • •	• • • •	-154,720			-154,720
	8a	Gross income from fu		ising events						
nue		(not including \$ contributions reported	d on	543,873 of line 1c).						
eve.		See Part IV, line 18			8a	2,207,329				
Other Revenue		Less: direct expen			8b	349,829				
the	С	Net income or (los	ss) fr	rom fundraisii	ng ev	ents 📂	1,857,500			1,857,500
	9a	Gross income from	gam	ing activities.						
		See <b>Part</b> IV, line 19	•		9a	0	_			
		Less: direct expen			9b	0				
	С	Net income or (los	ss) fr	rom gaming a	Ctivit	ies <del>-</del>	7			
	10a	Gross sales of inve	ento	ry, less						
		returns and allowa			10a	0				
		Less: cost of good			10b					
-	С	Net income or (los Miscellaneo			nvent	ory ► Business Code	T	1		
}	112	ATTORNEY AWAR		CVCITAC		90009	9 402,412	2		402,412
	b	OTHER REVENUE				90009	9 58,839			58,839
		<b>-</b>								
	c									
	d	All other revenue								
	e	Total. Add lines 1	1a-:	11d		•	461,25			
	12	Total revenue. S	ee ir	nstructions .			·			2 409 900
						·	31,879,148	'[		2,498,806 Form <b>990</b> (2019)

Form 990 (2019)				Page <b>10</b>
Part IX Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must co		_		· · · ·
Check if Schedule O contains a response or note to an	y line in this Part IX			🗸
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	352,584	352,584		
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	2,507,608	1,923,970	90,793	492,845
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
<b>7</b> Other salaries and wages	17,154,130	13,178,667	612,151	3,363,312
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	944,559	717,865	37,782	188,912
9 Other employee benefits	2,543,680	1,933,198	101,747	508,735
<b>10</b> Payroll taxes	1,545,428	1,174,526	61,817	309,085
11 Fees for services (non-employees):				
a Management	0			
<b>b</b> Legal	59,516	48,752	7,994	2,770
c Accounting	128,211	105,026	17,219	5,966
<b>d</b> Lobbying	0			
e Professional fundraising services. See Part IV, line 17	405,494			405,494
<b>f</b> Investment management fees	37,872		37,872	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,036,391	3,450,757	585,634	
12 Advertising and promotion	8,164	6,688	1,096	380
13 Office expenses	981,949	302,785	312,910	366,254
14 Information technology	555,935	278,899	193,069	83,967
15 Royalties	0			
<b>16</b> Occupancy	2,216,368	1,861,749	132,982	221,637
<b>17</b> Travel	925,579	700,290	45,058	180,231
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19 Conferences, conventions, and meetings	707,033	534,939	34,419	137,675
<b>20</b> Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	336,760	28,619	308,141	
23 Insurance	126,074	5,061	120,848	165
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DUES, FEES AND SUBSCRIPTIONS	506,632	284,190	118,250	104,192
b DIRECT MAIL	13,640			13,640
c MISCELLANEOUS	65,109	28,410	29,468	7,231
d				
e All other expenses				_
25 Total functional expenses. Add lines 1 through 24e	36,158,716	26,916,975	2,849,250	6,392,491

**26 Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here ► ☐ if following SOP 98-2 (ASC 958-720).

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33

Liabilities 22

Fund Balances

ō 29

Assets 30

(B) End of year

Page **11** 

15,500,523

3,263,991

6,586,232

10,721

0

244,379

915,864

0

0

0

0

0

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0

0

0

3,875,022

5.734.578

18,694,310

22,164,601

40,858,911

46,593,489

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28,579

46,593,489

1,859,556

20,043,200

Check if Schedule O	contains a	response	or note	to any	line in	this Part IX	

Cash-non-interest-bearing	10,130,901	
Savings and temporary cash investments	3,637,473	
Pledges and grants receivable net	13.374.325	

2 3 Accounts receivable, net .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net . . . .

Assets

Intangible assets . . .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Grants payable .

Inventories for sale or use . . . .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

Prepaid expenses and deferred charges .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here <a> \square</a> and

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here > \(\begin{align\*} \text{and} \end{and} \)

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation Investments—publicly traded securities . Investments—other securities. See Part IV, line 11 . . .

10a 10b

2.548,789 Investments—program-related. See Part IV, line 11 .

1,632,925 **Total assets.** Add lines 1 through 15 (must equal line 34) . .

Beginning of year

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576,801

2.816.552

21,137,711

24,244,339

45,382,050

48,198,602

35,041

48,198,602

1,756,842

482.909

123.540

253,783

1,187,625

19,455,914

0 5

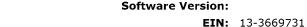
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Form 990 (2019)

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

# **Additional Data**



Name: The Center for Reproductive Rights Inc

Software ID:

Form 990 (2019)

Form 990, Part III, Line 4a: U.S. LEGAL PROGRAM - SEE SCHEDULE O

Form 990, Part III, Line 4b: GLOBAL LEGAL PROGRAM - SEE SCHEDULE O Form 990, Part III, Line 4c: COMMUNICATIONS: THE COMMUNICATIONS PROGRAM INFORMS A WIDE RANGE OF EXTERNAL AUDIENCES ON THE CENTER'S ACTIVITIES AND IMPACT, DEVELOPING AND IMPLEMENTING MESSAGES THAT PROMOTE THE ORGANIZATION'S OVERALL MISSION AND GOALS, IT WORKS WITH THE U.S. AND GLOBAL PROGRAMS TO PUBLICIZE NEW CASES AND REPORTS, LEGAL VICTORIES, AND ADVOCACY EFFORTS THROUGH THE MEDIA. AS WELL AS THE CENTER'S OWN WEBSITE AND NEWSLETTERS, IT IS ALSO

RESPONSIBLE FOR DESIGNING AND LAYING OUT REPORTS PRODUCED BY THE LEGAL PROGRAMS.

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Jill D Berger

Vivian Siu

Ileana Futter

LAURA PEROZO

......

Chief marketing &communication

SENIOR DIRECTOR, FINANCE & ADM

......

Senior Major Gifts Officer

Senior Director, Development

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
NANCY NORTHUP PRESIDENT AND CEO	35.0 0.0	Х		х				502,498	0	49,940
MICHELLE DEES CHIEF STRATEGY&OPERATING OFFIC	35.0 0.0			х				343,431	0	49,940
ANNE MATSUI CHIEF DEVELOPMENT OFFICER	35.0 0.0				х			327,819	0	40,826

CHIEF STRATEGY&OPERATING OFFIC	0.0						
ANNE MATSUI	35.0						
CHIEF DEVELOPMENT OFFICER	0.0		Х		327,819	0	
Antony Musyoka	35.0						
Chief HR Officer	0.0		Х		277,519	0	
LOURDES RIVERA	35.0						

			Х		327,819	0	l
CHIEF DEVELOPMENT OFFICER	0.0						
Antony Musyoka	35.0						
	•••••		Х		277,519	ا ا	i
Chief HR Officer	0.0				,	Į	
LOURDES RIVERA	35.0						
			X I		241,308	ᅵ	ı

35.0

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SENIOR VP, US PROGRAM	0.0		X		241,308	0	46,216
DARLENE LARSEN	35.0						
SENIOR DIRECTOR MAJOR GIFTS				Х	212,071	0	33,042

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215,183

219,594

192,708

178,747

39,948

26,619

17,586

31,959

41,156

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(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

DIRECTOR, thru 06/20

LORRAINE CLASQUIN

NICKI NICHOLS GAMBLE

DIRECTOR, thru 06/20

DAVID HOFFMAN

......

MARIA CARDONA

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

RACHEL LAM

	ally hours	anu	a un	ecto	•	ustee,		Organization	organizations	l lioni the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Julie Rikelman Senior Director, Litigation	35.0					х		181,537	0	32,019
KATHLEEN TAIT CHAIR	0.0	Х		х				0	0	0
JONATHAN KAUFELT VICE CHAIR, thru 06/20	3.0	Х		х				0	0	0
IB KITTBENGE	1.0									

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CHAIR	0.0							
JONATHAN KAUFELT	3.0	×	l l <sub>x</sub>	,			0	
VICE CHAIR, thru 06/20	0.0	^	, ,					
JB KITTREDGE	1.0	V		,				
TREASURER	0.0	^	^	`			0	
CYNTHIA BLUMENTHAL	1.0							
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(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

DIRECTOR

Mary Rubin

DIRECTOR

DIRECTOR

Director

Director

RoAnn Costin

Melanie Gray

.......

Jennifer Sokoler

Catalina Botero Marino

DIRECTOR, thru 01/20

	C							(11/ 2/1000	(14/ 2/4000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	1 ()	Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
HEIDI LINDELOF	1.0	Х						0	0	0
DIRECTOR	0.0									
JANICE MACAVOY	1.0	X						0	C	0
DIRECTOR	0.0								9	
KARLA MARTIN	1.0									
		Х						0	0	0

JANICE MACAVOY	1.0				0	
DIRECTOR	0.0	^				
KARLA MARTIN	1.0	_			0	
DIRECTOR	0.0	^			J	
AMY METZLER RITTER	1.0	v			0	
DIRECTOR	0.0	^			J	
JOSEPH STERN	1.0					

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(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer from the from related compensation

organization

organizations

from the

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Carole PRESERN

Director

Director

Louisa Ritter

	any nours	and	a dir	recto	or/tr	ustee	}	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Janet Levit	1.0	X						0	0	0
Director	0.0								0	
Michele Coleman Mayes	1.0	X						0	0	0
Director	0.0								-	
Joachim Osur	1.0	X						0	0	0
Director	0.0							Ĭ		

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SC	HED	ULE A	- Dublic #	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047
	m 99		Complete if the or	rganization is a sect 4947(a)(1) nonexe ▶ Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2019 Open to Public
		the Treasury	► Go to <u>www.irs</u>	<u>.gov/Form990</u> for i	nstructions and	I the latest info	ormation.	Inspection
Nam	e of th	<b>he organiza</b> or Reproductive					Employer identific	ation number
THE C	sincer to	л кергосисиче	ragita inc				13-3669731	
	rt I		for Public Charity State				See instructions.	
1 1	rganiz		a private foundation because	•	•		(A)(:)	
		•	onvention of churches, or as					
2			scribed in section 170(b)(		,			
3		·	or a cooperative hospital serv	-			-	
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's
5			ation operated for the benefit (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	ped in <b>section 170</b>
6		A federal, s	tate, or local government or	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	ı)(v).	
7	<b>✓</b>		ation that normally receives a <b>(O(b)(1)(A)(vi).</b> (Complete		s support from a	governmental u	nit or from the genera	al public described in
8		A communi	ty trust described in <b>section</b>	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. Se					ege or university or a
10		from activit	ation that normally receives: lies related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	pport from gross
11		An organiza	ation organized and operated	l exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and operated ly supported organizations of through 12d that describes	lescribed in <b>section 5</b>	<b>09(a)(1)</b> or <b>se</b>	ction 509(a)(2	). See <b>section 509(</b> a	
a		organizatio	supporting organization oper n(s) the power to regularly a <b>Part IV, Sections A and B.</b>	ppoint or elect a majo				
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar				
С		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio	•	•	, -	ted with, its
d		Type III n	on-functionally integrated integrated integrated. The organization (s). You must complete Par	<b>d.</b> A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e			box if the organization receiver or Type III non-functionally			RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter	the number	of supported organizations				<u> </u>	
g			ing information about the su		т'			T
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
Tota			tion Act Notice, see the Ir		Cat. No. 11285		Schedule A (Form 9	

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total (or fiscal year beginning in) ▶ Gifts, grants, contributions, and membership fees received. (Do not 25,984,160 31,281,993 32,867,477 33,084,282 29,380,342 152,598,254 include any "unusual grant.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge... 25,984,160 32,867,477 29,380,342 152,598,254 31,281,993 33,084,282 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 36,883,211 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . Public support. Subtract line 5 115,715,043 from line 4. Section B. Total Support Calendar vear (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total (or fiscal year beginning in) ▶ 25,984,160 31,281,993 32,867,477 33,084,282 29,380,342 152,598,254 Amounts from line 4. . Gross income from interest. dividends, payments received on 378,829 securities loans, rents, royalties 305,040 297,297 408,120 334,775 1,724,061 and income from similar sources Net income from unrelated business activities, whether or not 1,857,500 596,757 2,454,257 the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 770.021 259,604 897,496 720.344 461,251 3.108.716 assets (Explain in Part VI.). . **Total support.** Add lines 7 through 159,885,288 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) . . . . . . . . . . 14 72.374 % 15 Public support percentage for 2018 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . 66.596 % 16a 33 1/3% support test-2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box h 33 1/3% support test-2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	( ) 2015	(1) 2016	( ) 2247	(1) 2010	( ) 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions,						
	merchandise sold or services						
	performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business						
4	under section 513  Tax revenues levied for the						
•	organization's benefit and either paid						
_	to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
<b>L</b>	3 received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
Se	ection B. Total Support		1	<del></del>			Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources.						
b	Unrelated business taxable income						
	(less section 511 taxes) from						
	businesses acquired after June 30, 1975.						
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on.						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
12	(Explain in Part VI.) <b>Total support.</b> (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and <b>stop here</b>						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18   33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCHONS	. 📂 📖

Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2). 2

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the

determination. 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or

4b supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. 4c Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and

(c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a amendment to the organizing document).

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

5с Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) . 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

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Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
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than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in
which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
```

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

	edule A (101111 550 01 550 E2) 2015			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
		11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in <b>Part VI</b> .	11c		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations			
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax			
	year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
•	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O  Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in <b>Part VI</b> ). See instructions	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	
9	Distributable amount for 2019 from Section C, line 6	

7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to who details in <b>Part VI</b> ). See instructions	nich the organization is respons	sive (provide	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions if any for years prior to 2019			

	***		
7 Total annual distributions. Add lines 1 through 6.			
Distributions to attentive supported organizations to who details in <b>Part VI</b> ). See instructions	nich the organization is respons	sive (provide	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2019:			
a From 2014			
<b>b</b> From 2015			
c From 2016			

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
<b>b</b> From 2015			
c From 2016			
<b>d</b> From 2017			
<b>e</b> From 2018			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2019 distributable amount			
<ul> <li>Carryover from 2014 not applied (see instructions)</li> </ul>			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	The state of the s	·	

c From 2016		
d From 2017		
e From 2018		
<b>Total</b> of lines 3a through e		
g Applied to underdistributions of prior years		
n Applied to 2019 distributable amount		
Carryover from 2014 not applied (see instructions)		
Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
Applied to 2019 distributable amount		
Remainder. Subtract lines 4a and 4b from 4.		

instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
<b>b</b> Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
<b>5</b> Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		

C Remainder, Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
<b>7 Excess distributions carryover to 2020.</b> Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2015		
<b>b</b> Excess from 2016		
c Excess from 2017		

Schedule A (Form 990 or 990-EZ) (2019)

d Excess from 2018.

e Excess from 2019. . . . .

### **Additional Data**

# Software ID:

**Software Version:** 13-3669731

Name: The Center for Reproductive Rights Inc

Part VI
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

instructions).

Facts And Circumstances Test

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

So to www.irc.gov/Form990 for instructions and the latest information

OMB No. 1545-0047

DLN: 93493015012011

Open to Public

☐ No

☐ Yes

Department of the Treasury Īf

If "Yes," describe in Part IV.

EZ)

3

5

SCHEDULE C (Form 990 or 990-

Internal Revenue	Service P G to WWW	101	motifications and the la	icese information	Ilispe	CLIOII
If the organiza	tion answered "Yes" on Form	990, Part IV, Line 3, or	Form 990-EZ, Part V, lin	e 46 (Political Campaign A	ctivities), the	n
	(c)(3) organizations: Complete		•			
	1(c) (other than section 501(c)(3	,, 0	te Parts I-A and C below.	Do not complete Part I-B.		
	7 organizations: Complete Part					
	ition answered "Yes" on Form					_
	1(c)(3) organizations that have f					
	1(c)(3) organizations that have i					
	ition answered "Yes" on Form		oxy Tax) (see separate i	nstructions) or Form 990-	=Z, Part V, IIn	e 35C
	ee separate instructions), thei 1(c)(4), (5), or (6) organizations:					
Name of the	· // /- /- /- /-	. Complete Fart III.		Employer ident	ification num	her
	Reproductive Rights Inc			Linployer ident	incation num	ibei
				13-3669731		
Part I-A	complete if the organizati	on is exempt under	section 501(c) or is	a section 527 organiz	ation.	
	a description of the organization campaign activities")	's direct and indirect poli	cical campaign activities in	n Part IV (see instructions fo	r definition of	
2 Political	campaign activity expenditures	(see instructions)		<b>&gt;</b> \$	i	
3 Voluntee	r hours for political campaign ac	ctivities (see instructions				
	complete if the organizati	· · · · · · · · · · · · · · · · · · ·				
1 Enter th	e amount of any excise tax incur	rred by the organization (	ınder section 4955	<b>&gt;</b> \$	i	
2 Enter th	e amount of any excise tax incur	rred by organization man	agers under section 4955	<b>&gt;</b> \$	i	
3 If the or	ganization incurred a section 49	55 tax, did it file Form 47	20 for this year?		☐ Yes	□ No
<b>4a</b> Wasac	orrection made?				☐ Yes	Пи

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... 🕨 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt

Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.........

Did the filing organization file Form 1120-POL for this year?

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
1				
2				
3				
4				
5				
6				

154.657

Grassroots ceiling amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

1.500.000

Return Reference

or each "Ye	es" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(	a)	(	b)
ctivity.		Yes	No	Am	ount
	g the year, did the filing organization attempt to influence foreign, national, state or local legislation, ling any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
a Volun	teers?				
<b>b</b> Paid s	taff or management (include compensation in expenses reported on lines 1c through 1i)?				
<b>c</b> Media	advertisements?				
<b>d</b> Mailin	gs to members, legislators, or the public?				
<b>e</b> Public	ations, or published or broadcast statements?				
<b>f</b> Grant	s to other organizations for lobbying purposes?				
<b>g</b> Direct	contact with legislators, their staffs, government officials, or a legislative body?				
<b>h</b> Rallie	s, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other	activities?				
j Total.	Add lines 1c through 1i				
a Did th	ne activities in line 1 cause the organization to be not described in section 501(c)(3)?				
<b>b</b> If "Ye	s," enter the amount of any tax incurred under section 4912				
c If "Ye	s," enter the amount of any tax incurred by organization managers under section 4912				
<b>d</b> If the	filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-		(5), o	r secti	on	
	501(c)(6).		r secti	Y	es N
. Were	501(c)(6). substantially all (90% or more) dues received nondeductible by members?		r secti	1 Ye	es N
. Were	501(c)(6).  substantially all (90% or more) dues received nondeductible by members?		E	1 2	es N
L Were Did th	501(c)(6).  substantially all (90% or more) dues received nondeductible by members?		 [	1 2 3	
. Were 2 Did th 3 Did th	substantially all (90% or more) dues received nondeductible by members?	(5), o		You 1 2 3 on 501	
Were Did the property of the p	substantially all (90% or more) dues received nondeductible by members?  be organization make only in-house lobbying expenditures of \$2,000 or less?  be organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  assessments and similar amounts from members	 (5), o		You 1 2 3 on 501	
. Were Did th Did th Tart III- Dues, Section	substantially all (90% or more) dues received nondeductible by members?	(5), o		You 1 2 3 on 501	
Were Did the D	501(c)(6).  substantially all (90% or more) dues received nondeductible by members?  see organization make only in-house lobbying expenditures of \$2,000 or less?  see organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  assessments and similar amounts from members  on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	(5), o		You 1 2 3 on 501	
Were Did th Did th  art III-  Dues, Sectic expe a Curre b Carry	substantially all (90% or more) dues received nondeductible by members?  see organization make only in-house lobbying expenditures of \$2,000 or less?  see organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  assessments and similar amounts from members  on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political makes for which the section 527(f) tax was paid).	(5), o III-A		You 1 2 3 on 501	
Were Did th Did th Dues, Section expe Curre Carry Carry Total	substantially all (90% or more) dues received nondeductible by members?  see organization make only in-house lobbying expenditures of \$2,000 or less?  see organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  assessments and similar amounts from members  on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political enses for which the section 527(f) tax was paid).  In tyear  over from last year	(5), o III-A 1 2a 2b		You 1 2 3 on 501	
. Were Did the Dart III Dues, Section experiment Carry Carry Carry III not the oil	substantially all (90% or more) dues received nondeductible by members?  see organization make only in-house lobbying expenditures of \$2,000 or less?  see organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  assessments and similar amounts from members  on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political enses for which the section 527(f) tax was paid).  In tyear  over from last year  signate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are seen and the amount on line 2c exceeds the amount on line 3, what portion of the excess does reganization agree to carryover to the reasonable estimate of nondeductible lobbying and political	(5), o IIII-A  2a 2b 2c 3		You 1 2 3 on 501	
Dues, Carry Cartal Aggre I foot Carper	substantially all (90% or more) dues received nondeductible by members?  see organization make only in-house lobbying expenditures of \$2,000 or less?  see organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  assessments and similar amounts from members  on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political enses for which the section 527(f) tax was paid).  In tyear  over from last year  organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure are severed in section of the excess does organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	(5), o IIII-A 2a 2b 2c 3		You 1 2 3 on 501	
L Were Did th Did th Dues, Section Expense Carry Carry Total Aggre If not the on expense	substantially all (90% or more) dues received nondeductible by members?  see organization make only in-house lobbying expenditures of \$2,000 or less?  see organization agree to carry over lobbying and political expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."  assessments and similar amounts from members  on 162(e) nondeductible lobbying and political expenditures (do not include amounts of political enses for which the section 527(f) tax was paid).  In tyear  over from last year  gate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are seen that the amount on line 2c exceeds the amount on line 3, what portion of the excess does reganization agree to carryover to the reasonable estimate of nondeductible lobbying and political diditure next year?	(5), o IIII-A  2a 2b 2c 3		You 1 2 3 on 501	

Explanation

**SCHEDULE D** 

DLN: 93493015012011

2019

OMB No. 1545-0047

# **Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

(Form 990)

	tment of the Treasury al Revenue Service  ▶ Go to <u>www.irs.gov/Forr</u>	► Attach to Form m990 for instructi		rmation.	Open to Public Inspection
	me of the organization	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ons and the fatest into		ntification number
	Center for Reproductive Rights Inc			13-3669731	
Pa	ort I Organizations Maintaining Donor Adv	ised Funds or O	ther Similar Funds o		
	Complete if the organization answered "Yo				
		(a) Dono	r advised funds	(b) Funds	and other accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisorganization's property, subject to the organization's e				he Yes No
6	Did the organization inform all grantees, donors, and d charitable purposes and not for the benefit of the dono private benefit?	r or donor advisor,	or for any other purpose		
Pa	rt II Conservation Easements.  Complete if the organization answered "Yo	es" on Form 990	Part IV line 7		
1	Purpose(s) of conservation easements held by the orga				
-	Preservation of land for public use (e.g., recreation		Preservation of ar	historically impo	rtant land area
	Protection of natural habitat		Preservation of a		
	Preservation of open space			ceremed motorie s	i decare
2	Complete lines 2a through 2d if the organization held a	a qualified conservat	ion contribution in the fo	rm of a conservat	ion
2	easement on the last day of the tax year.	qualified collservat	ion contribution in the fo		the End of the Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
c	Number of conservation easements on a certified histor	ric structure include	d in (a)	2c	
d	Number of conservation easements included in (c) acqu structure listed in the National Register	uired after 7/25/06,	and not on a historic	2d	
3	Number of conservation easements modified, transferred tax year ▶	ed, released, exting	uished, or terminated by	the organization	during the
4	Number of states where property subject to conservati	on easement is loca	ted <b>▶</b>		
5	Does the organization have a written policy regarding t			of violations,	
	and enforcement of the conservation easements it hold	ls?			☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of v	iolations, and enforcing c	onservation easer	nents during the year
7	Amount of expenses incurred in monitoring, inspecting  ▶ \$	, handling of violation	ons, and enforcing conser	vation easements	during the year
8	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)?			70(h)(4)(B)(i)	☐ Yes ☐ No
9	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the or			
Par	Organizations Maintaining Collections Complete if the organization answered "Yo	•	•	ner Similar Ass	sets.
1a	If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its fina	r public exhibition, e	ducation, or research in		
b	If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for put following amounts relating to these items:				
(	(i) Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$ _	
	ii)Assets included in Form 990, Part X				
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS			ancial gain, provid	e the
а	Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$	
b	Assets included in Form 990, Part X			▶\$	
or	Paperwork Reduction Act Notice, see the Instruction	ns for Form 990.	Cat. No.	52283D <b>Sche</b>	dule D (Form 990) 201

Sche	edule D (Form 990) 2019						Page <b>2</b>
Par	t III Organizations Maintaining Col	lections of Art, Histo	rical Treas	ures, or Other S	milar Assets (	continued)	
3	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):						
а	Public exhibition	d	Loa	n or exchange progra	ims		
b	Scholarly research	е	☐ Oth	er			
c	Preservation for future generations						
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.						
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	•				s 🗆 N	lo
Pa	rt IV Escrow and Custodial Arrange Complete if the organization answ X, line 21.		90, Part IV,	line 9, or reported	an amount on F	orm 990,	Part
1a	Is the organization an agent, trustee, custodia included on Form 990, Part X?					s 🗆 N	lo
b	If "Yes," explain the arrangement in Part XIII	and complete the following	ng table:		Amount		_
С	Beginning balance	·	-	1c			_
d	Additions during the year			4.1			
е	Distributions during the year			-			
f	Ending balance						
2a	Did the organization include an amount on Fo	rm 990 Part X line 21 fo	or escrow or c	ustodial account liah	lity?	s 🗆 N	_  a
b	-				_	:5 LI	10
	If "Yes," explain the arrangement in Part XIII  If to Endowment Funds.	Check here if the explana	ation has bee	n provided in Part XI	ш ⊔		
Fe	Complete if the organization answ	ered "Yes" on Form 99	0, Part IV,	line 10.			
			Prior year		d) Three years back	(e) Four yea	rs back_
1a	Beginning of year balance	1,563,643	1,622,705	1,602,540	1,498,101	1,	611,137
b	Contributions						
	Net investment earnings, gains, and losses	-16,265	27,937	107,409	198,289		-24,217
d	Grants or scholarships						
е	Other expenditures for facilities	82,472	81,418	79,894	82,721		81,831
_	and programs	7,277		· ·	,		
	Administrative expenses	<u> </u>	5,581 1,563,643	7,350 1,622,705	7,129 1,606,540	1	6,988
_	End of year balance	1,457,629			1,606,540	1,	498,101
2	Provide the estimated percentage of the curre	,	1g, column (	a)) held as:			
а		27.220 %					
b	Permanent endowment ► 68.890 %						
c		90 %					
_	The percentages on lines 2a, 2b, and 2c shou	'					
3a	Are there endowment funds not in the posses organization by:	sion of the organization th	iat are held a	nd administered for t	he	Yes	No
	(i) unrelated organizations				3:	a(i)	No
	(ii) related organizations					n(ii)	No
b		s listed as required on Sc	nedule R? .		📑	3b	
4	Describe in Part XIII the intended uses of the	organization's endowmen	t funds.				
Pa	rt VI Land, Buildings, and Equipmer						
	Complete if the organization answ						
	Description of property  (a) Cost or oth (investme		er pasis (other)	(c) Accumulated dep	or eciation (	( <b>d)</b> Book valu	e
<b>1</b> a	Land						
b	Buildings						
c	Leasehold improvements		714,464	4	320,635		393,829
d	Equipment		546,10	7	435,234		110,873

1,288,218

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

411,162

915,864

877,056

Part VII	Investments—Other Securities.					
	Complete if the organization answered "Yes" on Form 990, F  (a) Description of security or category  (including name of security)	Cart IV, I (b) Book value	ne 111	(c) Metho	Part X, line 12. d of valuation: -year market val	
	l derivatives					
(2) Closely-l (3)Other	held equity interests					
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	n (b) must equal Form 990, Part X, col. (B) line 12.)	,				
Part VIII	<b>Investments—Program Related.</b> Complete if the organization answered 'Yes' on Form 990, F	Part IV, I	ne 11	. See Form 990,	Part X, line 13	
	(a) Description of investment			(b) Book value	(c) Method of Cost or end-of val	-year market
(1)					Vai	<del>-</del>
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Columi	n (b) must equal Form 990, Part X, col.(B) line 13.)		•			
Part IX	Other Assets.  Complete if the organization answered 'Yes' on Form 990, P	art IV, liı	ne 11d	. See Form 990, Par	t X, line 15.	
(1)	(a) Description					Book value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	mn (b) must equal Form 990, Part X, col.(B) line 15.)					
Part X	Other Liabilities.  Complete if the organization answered 'Yes' on Form 990, P			or 11f.See Form	·	ne 25.
1.	(a) Description of liability	•			<b>(b)</b> Boo	k value
(1) Federal (3)	income taxes					0
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colum	n (b) must equal Form 990, Part X, col.(B) line 25.)			•		3,875,022
-	or uncertain tax positions. In Part XIII, provide the text of the footnot 's liability for uncertain tax positions under FIN 48 (ASC 740). Check l		-			

Part XI

2

а

b

d

e

5

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Schedule D (Form 990) 2019

Page 4

27,246,570

37,872

31,879,148

27,490,141

36,120,844

37,872

36.158.716

Schedule D (Form 990) 2019

### Subtract line **2e** from line **1** . . . . . . . . 3 3 31,841,276 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . 4a 37,872 4b b Add lines **4a** and **4b** . . . . . . 4c C

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

2a

2b

2c

2d

2a

2b

2c

2d

4a

4b

Explanation

-243.571

121.253

27,368,888

121,253

37.872

2e

5

2e

3

4c

5

27.368.888

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . . . . 1 1 63,610,985 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . . Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments . . . .

Donated services and use of facilities . . . . .

Other (Describe in Part XIII.)

Recoveries of prior year grants . . . . . .

Donated services and use of facilities . . .

Prior year adjustments . . . . .

Subtract line 2e from line 1 . . . . . . . .

Add lines **4a** and **4b** . . . . . . . . . . . .

Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . . .

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

chedule D (Forn	e D (Form 990) 2019 Page		
Part XIII	Supplemental Info	rmation (continued)	
Return Reference		Explanation	

Schedule D (Form 990) 2019

### **Additional Data**

Software ID: Software Version:

**EIN:** 13-3669731

Name: The Center for Reproductive Rights Inc

Supplemental Informat	ion

Return Reference

Explanation PART V, LINE 4: THE ENDOWMENT FUND WAS ESTABLISHED TO SUPPORT A LEGAL FELLOWSHIP POSITION AT THE CENTER FOR REPRODUCTIVE RIGHTS.

Supplemental Information								
Return Reference	Explanation							
PART X, LINE 2:	The organization has not taken an unsubstantiated tax position that would require provisio n of a liability under ASC 740. Under ASC 740, an organization must recognize the tax liab ilities associated with tax positions taken for tax return purposes when it is more likely than not that the position will not be sustained upon examination. The organization does not believe there are any material uncertain tax positions and, accordingly, has not recognized any liability for unrecognized tax benefits as of June 30, 2020 and 2019. The organization has filed IRS Form 990 tax returns, as required, and all other applicable returns in jurisdictions where it is required. For the year ended June 30, 2020 and 2019 there were no interest or penalties recorded or included in the accompanying financial statements. The Tax Cuts and Jobs Act (the "Act") which was signed into law in December 2017, contains various provisions affecting not-for-profit organizations. Tax-exempt organizations are im pacted in part by the inclusion of a new excise tax on excess compensation for covered employees and changes to unrelated business income. The Acts provisions may also impact donor incentives for charitable giving. The Act did not have a significant impact on the financ ial statements for the year ended June 30, 2020 and 2019.							

upplemental Information									
Return Reference	Explanation								
Part XI, Line 2d and Part XII, Line 2d	book to tax difference: \$121,253.								

Sι

SCHEDULE F Form 990)	State	ted States	OMB No. 1545-0047			
	► Comp	lete if the organi	zation answered "	ine 14b, 15, or 16.	2019	
Department of the Treasury	,	Go to www.irs.		to Form 990. nstructions and the latest i	nformation.	Open to Public
nternal Revenue Service						Inspection
ame of the organization he Center for Reproducti	ve Riahts Inc				Employer ide	ntification number
·					13-3669731	
	<b>nformation</b> Part IV, line		Outside the U	<b>Jnited States.</b> Comple	te if the organization a	answered "Yes" on
For grantmakers	Does the or	ganization ma	intain records to	substantiate the amount	of its grants and	
other assistance, t	he grantees'	eligibility for th	ne grants or assis	stance, and the selection	criteria used	
to award the grant	ts or assistan	ce?				☑ Yes 🗌 No
For grantmakers outside the United		Part V the org	anization's proce	dures for monitoring the	use of its grants and ot	her assistance
Activites per Region	. (The followin	ng Part I, line 3	table can be dupli	cated if additional space is	needed.)	
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data						
<b>3a</b> Sub-total			3 35			4,953,01
3a Sub-total b Total from continuat Part I		:	3 35			4,953,01

	Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.											
L	(a) Name of organization	(b) IRS code section and EIN (if	(c) Region	(d) Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV,			

_	and EIN (if applicable)	_	-	disbursement	assistance	assistance	(book, FMV, appraisal, other)
See Add'l Data							

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . . 17

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-Schedule F (Form 990) 2019

	uplicated if addit	(c) Number of		(a) Mannay of as -1-	(f) Amount of	(a) Decembring	(h) Math
ype of grant or assistance	( <b>b)</b> Region	recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sched	dule F (Form 990) 2019		Page <b>4</b>
Par	Toreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	<b>☑</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		☐ Yes	<b>✓</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations. (see Instructions for Form 5471)	Yes	<b>☑</b> No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	Yes	<b>☑</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships		
	(see Instructions for Form 8865)	☐Yes	<b>✓</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form		
	5713; don't file with Form 990)	☐Yes	<b>✓</b> No

Schedule F (	Form 990) 2019 Page <b>5</b>
Part V	Supplemental Information  Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
Return Reference	dule F, Supplemental Information  Explanation
Part I, LINE 2:	GRANTS WERE PAID TO NONPROFIT PARTNER ORGANIZATIONS THAT WORK TO SUPPORT THE CENTER'S MISSION OF ADVANCING REPRODUCTIVE HEALTH AND HUMAN RIGHTS. THE GLOBAL LEGAL PROGRAM SUPPORTS LEGAL REFORM EFFORTS AND ARGUMENTS FOR PRECEDENT-SETTING CASES IN NATIONAL COURTS IN AFRICA, ASIA, EASTERN EUROPE AND LATIN AMERICA, AND FURTHER CATALYZES REPRODUCTIVE RIGHTS ADVOCACY WORLDWIDE BY EMPOWERING NATIONAL ADVOCATES TO USE LEGAL AND HUMAN

REPRODUCTIVE HEALTH AND HUMAN RIGHTS. THE GLOBAL LEGAL PROGRAM SUPPORTS LEGAL REFORM EFFORTS AND ARGUMENTS
FOR PRECEDENT-SETTING CASES IN NATIONAL COURTS IN AFRICA, ASIA, EASTERN EUROPE AND LATIN AMERICA, AND FURTHER
CATALYZES REPRODUCTIVE RIGHTS ADVOCACY WORLDWIDE BY EMPOWERING NATIONAL ADVOCATES TO USE LEGAL AND HUMAN
RIGHTS STRATEGIES THROUGH COLLABORATIVE LITIGATION AND ADVOCACY, NATIONAL AND REGIONAL TRAININGS, AND THE
FOSTERING OF A DIALOGUE AMONG KEY REPRODUCTIVE RIGHTS STAKEHOLDERS. PRIOR TO SIGNING A GRANT AGREEMENT, THE
CENTER'S EMPLOYEES RUN A BACKGROUND CHECK FOR ANY NEW GRANTEE. PARTNER ORGANIZATIONS SUBMIT ACTIVITY REPORTS
TO ENSURE COMPLIANCE WITH THE TERMS OF THE AGREEMENTS. PROJECT SUPERVISORS REGULARLY CHECK IN WITH PARTNER
ORGANIZATIONS TO MAKE SURE THAT ACTIVITIES ARE BEING COMPLETED ON TASK AND ON TIME.

#### **Additional Data**

East Asia and the Pacific

#### Software ID: Software Version:

Activities Outside The United States

**EIN:** 13-3669731

Name: The Center for Reproductive Rights Inc

advocacy & litigation

81,731

Form 990 Schedule F Par	orm 990 Schedule F Part 1 - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region						
Central America and the Caribbean	0	0	Program Services	advocacy & litigation	143,110						

0 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Europe (Including Iceland and 12 | Program Services 2,262,104 advocacy & litigation Greenland) Middle East and North Africa advocacy & litigation 9,752 0 Program Services

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South America advocacy & litigation 596,463 8 Program Services South Asia 2 Program Services advocacy & litigation 458,802

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the region) Sub-Saharan Africa IADVOCACY & LITIGATION 1.081.532 13 Program Services Central America and the 0 Grantmaking PROMOTE 62,990 Caribbean RIGHTS&JUSTICE

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) South America 0 |Grantmaking PROMOTE 44,500 RIGHTS&JUSTICE South Asia 0 |Grantmaking PROMOTE 110,545 IRIGHTS&JUSTICE

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (f) Total expenditures (d) Activities conducted offices in the employees or in region (by type) (i.e., is a program service, for region describe specific type of reaion agents in fundraising, program services, grants to service(s) in region region recipients located in the reaion) Sub-Saharan Africa 101,481 0 |Grantmaking PROMOTE RIGHTS&JUSTICE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 23,000 WIRE Central America PROMOTE land the IRIGHTS & Caribbean JUSTICE Central America PROMOTE 39,990 WIRE land the IRIGHTS &

Caribbean

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South America **IPROMOTE** 18,000 WIRE RIGHTS & JUSTICE South America **IPROMOTE** 14.000 WIRE IRIGHTS &

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South America **IPROMOTE** 12,500 WIRE RIGHTS & JUSTICE South Asia **IPROMOTE** 10.711 WIRE

IRIGHTS & JUSTICE

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia IPROMOTE: 28,906 WIRE RIGHTS & JUSTICE South Asia IPROMOTE: 13.688 WIRE IRIGHTS &

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia IPROMOTE: 51,892 WIRE RIGHTS & JUSTICE South Asia IPROMOTE: 5.348 WIRE IRIGHTS &

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) 8,000 WIRE Sub-Saharan PROMOTE Africa IRIGHTS & JUSTICE Sub-Saharan IPROMOTE: 15.973 WIRE IRIGHTS &

Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan PROMOTE 15,000 WIRE Africa IRIGHTS & JUSTICE Sub-Saharan IPROMOTE: 8,000 WIRE Africa IRIGHTS &

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan PROMOTE 12,951 WIRE Africa IRIGHTS & JUSTICE Sub-Saharan IPROMOTE: 12.657 WIRE Africa IRIGHTS &

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan PROMOTE 21,922 WIRE Africa IRIGHTS & JUSTICE Sub-Saharan IPROMOTE: 6.978 WIRE

Africa IRIGHTS & JUSTICE

SCHEDULE G

(Form 990 or 990-EZ)

# **Supplemental Information Regarding**

Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

**Open to Public** Inspection

DLN: 93493015012011 OMB No. 1545-0047

Department of the Treasury Attach to Form 990 or Form 990-EZ. Internal Revenue Service ▶Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number Name of the organization

he Center for Reproductive Rights	s Inc				13-3669731	
Part I Fundraising Activ	•	_		answered "Yes" on Fo		7.
1 Indicate whether the organiz	ation raised funds th	rough any	of the fo	llowing activities. Check a	ill that apply.	
a 🗹 Mail solicitations			e	Solicitation of non-	government grants	
<b>b</b> Internet and email solicit	ations		f	Solicitation of gove	rnment grants	
c Phone solicitations			g	✓ Special fundraising	events	
d 🗹 In-person solicitations						
Did the organization have a or key employees listed in Formula but If "Yes," list the 10 highest problem to be compensated at least 5	orm 990, Part VII) or vaid individuals or ent	entity in o	connectio	n with professional fundra	ising services?	s 🗆 No r is
i) Name and address of individua or entity (fundraiser)	(ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
	Direct Mail	Yes	No			
AB DATA	consulting		No	3,437,726	267,150	3,170,576
ASTIC	gala consultant		No	1,939,232	30,000	1,909,232
MERREN TECHNOLOGIES	FUNDRAISING CONSULTANT		No	676,641	96,000	580,641
PUBLIC INTEREST communication	TELEFUNDER		No	29,891	12,344	17,547
						_
otal			•	6,083,490	405,494	5,677,996
3 List all states in which the orga	anization is registered	or licens	ed to soli	cit contributions or has be	en notified it is exempt fi	rom registration or

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, HI, ID, IL, IN, IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PÁ, RÍ, SC, SD, TN, TX, VT, VA, WÁ, WV, WI, WY

	rt II Fundraising Events. Comple than \$15,000 of fundraising e				
	gross receipts greater than \$5		<b>(b)</b> Event #2	(c)Other events	(d) Total events (add col. (a) through
		Gala (event type)	LA (event type)	2 (total number)	col. <b>(c)</b> )
Revenue					
	1 Gross receipts	1,741,372	536,034	473,796	2,751,202
	2 Less: Contributions	265,148	75,029	203,696	543,873
	3 Gross income (line 1 minus line 2)	1,476,224	461,005	270,100	2,207,329
	4 Cash prizes				
ses	6 Rent/facility costs	104,629	74,700	8,035	187,364
Direct Expenses	7 Food and beverages	93,701	21,500	0,033	115,201
ሿ	8 Entertainment	25,078	·		26,441
irec	9 Other direct expenses	5,168	·		20,823
۵	10 Direct expense summary. Add lines 4 t	·			349,829
	11 Net income summary. Subtract line 10				1,857,500
Par	<b>t III Gaming.</b> Complete if the orga on Form 990-EZ, line 6a.		es" on Form 990, Part I	V, line 19, or reported	
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
æ	1 Gross revenue				
ses	2 Cash prizes				
Expenses	3 Noncash prizes				
т Ж	4 Rent/facility costs				
Direct	5 Other direct expenses				
	5 other direct expenses 1 1 1	☐ Yes %	☐ Yes %	☐ Yes %	
	<b>6</b> Volunteer labor	No	□ No	□ No	
	7 Direct expense summary. Add lines 2 t	nrough 5 in column (d)			
	8 Net gaming income summary. Subtract	line 7 from line 1, colum	n (d)	•	
9 a	Enter the state(s) in which the organization Is the organization licensed to conduct ga	ming activities in each of			Yes No
b	, , , , , , , , , , , , , , , , , , ,				
10a b	Were any of the organization's gaming lic If "Yes," explain:	enses revoked, suspende	d or terminated during the		☐ Yes ☐ No

Sche	dule G (Form 990 or 990-EZ) 2019	)					F	Page 3
11	Does the organization conduct ga	aming activities with nonmember	s?			Yes	Пио	
12	Is the organization a grantor, beformed to administer charitable of		member of a partnership or other	entity 		□Yes		
13	Indicate the percentage of gamir	g activity conducted in:						
а	The organization's facility .				13a			%
b	An outside facility				13b			%
14	Enter the name and address of the	ne person who prepares the orga	nization's gaming/special events bo	oks and re	ecords:			
	Name •							
	Address >							
15a	Does the organization have a cor revenue?	tract with a third party from who	om the organization receives gaming			□ <b>v</b>	П.	
b			anization 🕨 \$			⊔ Yes	⊔ но	
	amount of gaming revenue retain							
c	If "Yes," enter name and address	of the third party:						
	Name ►							
	Address >							
16	Gaming manager information:							
	Name ►							
	Gaming manager compensation	<b>▶</b> \$						
	Description of services provided I	<b>&gt;</b>						
	☐ Director/officer	☐ Employee	☐ Independent contrac	tor				
17	Mandatory distributions:							
а			stributions from the gaming proceed			□Yes	Пио	
b	Enter the amount of distributions	required under state law distrib	uted to other exempt organizations	or spent		□ 1es	100	
	in the organization's own exempt	<u> </u>	•					
Pai			ions required by Part I, line 2b, licable. Also provide any additio					 s.
	Return Reference		Explanation					

efil	le GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49301	15012	:011
Sch	nedule J	Co	ompensati	ion Information	0	MB No.	1545-0	0047
(For	m 990)	For certain Office						
		► Complete if the ord	Compensa anization answ	ated Employees vered "Yes" on Form 990, Part IV,	, line 23.	2019		
D			▶ Attach	to Form 990. instructions and the latest inforn		Openi		
•	tment of the Treasury al Revenue Service	P do to <u>www.ms.go</u>	101	mistructions and the latest miori		Insp	ectio	n
	me of the organization Center for Reproduct				Employer identifica	tion nu	ımber	
					13-3669731			
Pa	rt I Questi	ons Regarding Compensa	tion				I	
<b>1</b> a				the following to or for a person lister y relevant information regarding thes			Yes	No
		,	III to provide an	,				
		or charter travel companions	H	Housing allowance or residence for payments for business use of person	•			
		nification and gross-up payment	:s $\Box$	Health or social club dues or initiation				
		ary spending account		Personal services (e.g., maid, chauf				
b				follow a written policy regarding pays ve? If "No," complete Part III to expla		1b		
2				or allowing expenses incurred by all		2		
	directors, truste	es, officers, including the CEO/E	executive Director	r, regarding the items checked on Lir	ne la?			
3				ed to establish the compensation of the	ne			
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III.			
	☐ Compens	ation committee		Written employment contract				
		ent compensation consultant	<u>~</u>	Compensation survey or study				
	☐ Form 990	of other organizations	$\checkmark$	Approval by the board or compensa	tion committee			
4	During the year, related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fi	iling organization or a			
а	Receive a sever	ance payment or change-of-con	trol payment? .			4a		No
b	Participate in, o	r receive payment from, a suppl	lemental nonqual	ified retirement plan?		4b		No
c				nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	d provide the app	olicable amounts for each item in Part	: 111.			
	Only 501(c)(3	), <b>501</b> (c)(4), and <b>501</b> (c)(29)	) organizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section Ontingent on the revenues of:		the organization pay or accrue any				
а	The organization	1?				5a		No
b						5b		No
_	,	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section Contingent on the net earnings of		the organization pay or accrue any				
a	-	1?				6a		No
b	,	anization?				<b>6</b> b		No
7	•	•	on A, line 1a. did t	the organization provide any nonfixed	d			
-	payments not de	escribed in lines 5 and 6? If "Yes	s," describe in Pa	rt III		7	Yes	
8	subject to the in	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de 				N.c.
9	If "Yes" on line	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9		No
For F	Panerwork Redu	ction Act Notice, see the Ins	tructions for Fo	orm 990. Cat No. 5	50053T Schedule		1 990)	2019

Schedule J (Form 990) 2019

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			and other	( <b>D)</b> Nontaxable benefits	columns	Compensation in
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation		(B)(i)-(D)	column (B) reported as deferred on pric Form 990
See Additional Data Table								

Schedule J (Form 990) 2019 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Return Reference Explanation Part I, line 7: ISTAFF MEMBERS WHO ARE AT THE C-SUITE LEVEL, WHICH ARE STAFF MEMBERS ON THE EXECUTIVE TEAM, ARE ELIGIBLE FOR A PERFORMANCE-BASED BONUS ION AN ANNUAL BASIS. THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS SETS THE BONUS AMOUNT FOR THE INDIVIDUAL WHO IS SERVING AS BOTH PRESIDENT AND CEO. THE INDIVIDUAL WHO IS SERVING AS BOTH PRESIDENT AND CEO SETS THE BONUS AMOUNT FOR THE CHIEF STRATEGY AND OPERATIONS OFFICE (CSOO). CEO AND CSOO SET THE BONUS AMOUNT FOR ALL OTHER C-SUITE STAFF MEMBERS.

Schedule 1 (Form 990) 2019

2ANNE MATSUI

OFFICER

4Vivian Siu

Chief marketing &communication 5Antony Musyoka

Chief HR Officer

6Jill D Berger

Senior Director, Development 7Ileana Futter

8Julie Rikelman

9DARLENE LARSEN

10LAURA PEROZO

SENIOR DIRECTOR, FINANCE & ADM

**GIFTS** 

Senior Major Gifts Officer

Senior Director, Litigation

SENIOR DIRECTOR MAJOR

CHIEF DEVELOPMENT

**3**LOURDES RIVERA

SENIOR VP, US PROGRAM

(i)

(i)

(i)

(ii)

Software ID:

**Software Version:** 

**EIN:** 13-3669731

Name: The Center for Reproductive Rights Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

25,000

20,000

(A) Name and Title		(B) Breakdown	of W-2 and/or 1099-MISC	C compensation	(C) Retirement and (D) Nontaxable		(E) Total of columns	(F) Compensation in	
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990	
1NANCY NORTHUP PRESIDENT AND CEO	(i)	458,934	40,000	3,564	21,000	28,940	552,438	0	
t	(ii)	o	0	o	0	o	٥,	0	
1MICHELLE DEES CHIEF	(i)	312,379	30,000	1,052	21,000	28,940	393,371	0	
STRATEGY&OPERATING OFFIC	(ii)	o	0		0	o	,	0	

8,100

1,124

485

1,449

458

1,810

599

461

612

21,000

17,312

17,152

11,008

16,341

15,120

14,487

4,161

12,310

19,826

28,904

28,940

10,278

16,839

17,532

28,881

28,846

434

368,645

287,524

237,180

317,467

241,802

224,667

213,556

245,113

219,903

			compensation	compensation	
1NANCY NORTHUP PRESIDENT AND CEO	(i)	458,934	40,000	3,564	21,000
	(ii)	0	0	0	c
1MICHELLE DEES CHIEF	(i)	312,379	30,000	1,052	21,000

294,719

220,184

219,109

276,070

214,725

190,898

180,938

211,610

178,135

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493015012011 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2019 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** The Center for Reproductive Rights Inc 13-3669731 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art-Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods . . . . . Cars and other vehicles **7** Boats and planes . . . 8 Intellectual property . . . Securities—Publicly traded . Χ 67 3,292,509 MARKET QUOTATION 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . Qualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . Real estate—Other . . . 18 Collectibles . . . . 19 Food inventory . . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ ( \_\_\_ 26 Other ▶ ( \_\_\_\_\_\_) 27 Other ▶ ( \_\_\_\_\_\_) Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2019) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Page 2 Schedule M (Form 990) (2019) Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Return Reference Explanation SCHEDULE M, PART I, COLUMN(B): THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS IN PART I, COLUMN (B). Schedule M (Form 990) (2019)

efile GRAPH	IC print - DO NOT PROCESS As Filed Data -	DLN	: 93493015012011
SCHEDUL (Form 990 or EZ)	990- Complete to provide information for responses to specific Form 990 or 990-EZ or to provide any additional infor	questions on mation.	OMB No. 1545-0047  2019  Open to Public Inspection
Mannel Betherong		Employer ident	ification number
The Center for Rep	roductive Rights Inc	13-3669731	
Return Reference	e O, Supplemental Information  Explanation		
FORM 990, PART III, IINE 1:	The Center envisions a world where every person participates with dignity as an eq er of society, regardless of gender. Where every woman is free to decide whether of o have children and whether to get married; where access to quality reproductive here is guaranteed; and where every woman can make these decisions free from coercimination. The Center for Reproductive Rights (the Center) is a non-profit global hights organization that uses the power of law to advance reproductive rights as fundal human rights around the world. Its game-changing litigation, policy, and advocated combined with its unparalleled expertise in constitutional, international, and compare human rights law have transformed how reproductive rights are understood by cournments, and human rights bodies. The Center has played a key role in securing legies in the U.S., Latin America, Sub-Saharan Africa, Asia, and Europe on issues includes to life-saving obstetrics care, contraception, and safe abortion services. In ad on, the Center has built the legal capacity of womens rights advocates in over 60 cc s through its Pro Bono program and legal networks.	r when t ealth ca cion or dis uman dament r work ative es, gover al victor uding a dith ca	

Return Reference	Explanation
FORM 990, PART III, LINE 4A:	U.S. Legal Program: The U.S. Legal program strives to protect and advance reproductive lib erty and access to reproductive health care in the united states by employing diverse stra tegies grounded in the center's legal expertise via litigation and legal advocacy. the leg al victories of the U.S. legal program - including a landmark 2016 u.s. supreme court decision affirming a woman's right to access abortion and striking down abortion Texas restrictions, constituting an "undue burden" of the constitutional rights of women - have helped millions of women and their families by striking down abortion bans and other restrictions on access to reproductive health care, securing coverage for reproductive health services available through government - sponsored health insurance programs and protecting access to emergency contraception and confidential reproductive health care. the center's u.s. po licy and advocacy team works at the local, state and national levels to protect and promot e reproductive rights and health. it advocates for domestic and foreign policy that advanc es reproductive health and freedom, which allows women and families to prosper. The legal victories of the U.S. legal program include two U.S. Supreme Court victories in the last five years: 1) the 2020 U.S. Supreme Court decision in June Medical Services v. Russo which allowed abortion clinics in Louisiana to stay open to serve the one million women of reproductive age in the state; and 2) the landmark 2016 U.S. Supreme Court decision in Whole Woman's Health v. Hellerstedt affirming a woman's right to access abortion and striking dow n abortion restriction in Texas, constituting an "undue burden" of the constitutional rights of women.

roductive health care and redressed rights violations.

Return

Reference		
FORM 990, PART III, LINE 4B:	Global Legal Program: The global legal program works to establish and maintain legal prote ctions for reproductive rights at the national, regional, and international levels to improve the reality of women's lives with respect to their reproductive health, we are the recognized global leader in using the law to advance reproductive freedom, autonomy, and access to health care as fundamental human rights that governments are obligated to protect, respect, and fulfill. For nearly 30 years, our innovative legal strategies have been a driving force in many of the most important advances in reproductive rights law worldwide, and in broadening how human rights are understood and applied to some of the most pressing challenges societies face today. Our groundbreaking cases before national courts, united nat ions committees, and regional human rights bodies have dramatically expanded access to rep	

Explanation

annually. Perform other duties as delegated by the board.

Return

Reference	
FORM 990,	In fy16, the centers governing body delegated broad authority to act on its behalf to an e
PART VI,	xecutive committee. Membership: the president and all other officers shall be the members
SECTION A,	of the executive committee. The board chair, at his or her discretion, may invite other me
LINE 1:	mbers to any particular meeting. The board chair shall chair the committee. The scope of t
	he committees authority: act on behalf of the board when action is needed but a full board
	meeting is not possible or necessary. All actions of this type must be presented for rati
	fication at the next full board meeting. The executive committee shall not have the power

Explanation

meeting is not possible or necessary. All actions of this type must be presented for rati fication at the next full board meeting. The executive committee shall not have the power to amend the articles of the incorporation or the bylaws. Plan, with the president, the an nual review of the strategic plan by the board. Evaluate the performance of the president

Return Explanation

FORM 990,
PART VI,
SECTION A,
LINE 6:
the membership of the corporation shall at all times consist only of the directors of the corporation (the "directors"). the election of a person as a director shall likewise be an admission of such person to membership in the corporation. no person shall continue to be a member of the corporation (a "member") after ceasing to be a director.

ctor.

Return Reference	Explanation
,	In case of any increase or decrease from time to time in the number of directors, the boar
	d is authorized to assign the person to fill such newly created directorship. as a directo
SECTION A,	r shall likewise be an admission of such person to membership in the corporation. no perso
LINE 7A:	n shall continue to be a member of the corporation (a "member") after ceasing to be a dire

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 11B:

The form 990 was compiled by outside accountants based on supporting schedules prepared by the Centers accounting department. The draft 990 is reviewed by the accounting team, exec utive team and is circulated to the Board in PDF version for review prior to filing.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C:	At the beginning of each fiscal year, the centers board members and staff complete conflic t-of-interest forms to disclose if they or their immediate family have interests or other employment which would allow them to benefit financially or result in some type of persona I gain, due to the influence they may have on decisions made. The centers vice president o f global administration and office operations then reviews the conflict-of-interest disclo sure forms and, if a conflict is identified, the chief operating officer will be notified and will discuss the conflict with the appropriate parties and will take further action if necessary.

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15:	THE CENTER CONDUCTS A COMPENSATION AND BENEFITS ANALYSIS EVERY THREE YEARS TO DETERMINE IF THE CENTER'S COMPENSATION, LEAVE AND BENEFIT PROGRAMS ARE COMPETITIVE WITH COMPARABLE ORG ANIZATIONS. THE CENTER UNDERTOOK A WHOLISTIC COMPENSATION AND BENEFITS ANALYSIS IN 2017, I N WHICH THE CENTER ANALYZED SALARY AND BENEFITS INFORMATION PROVIDED BY 17 COMPARABLE COMP ANIES AND DATA FROM PUBLISHED SURVEYS FOR NON-PROFIT ORGANIZATIONS. THE CENTER ALSO SOLICI TED FEEDBACK FROM STAFF REGARDING THE CENTER'S COMPENSATION AND BENEFIT PROGRAMS THROUGH A N IN-HOUSE CUSTOM SURVEY. SALARIES AND BENEFITS OF STAFF POSITIONS THAT WERE FOUND TO BE B ELOW THAT OF COMPARABLE COMPANIES WERE ADJUSTED ACCORDINGLY. IN OCTOBER 2019 THE CENTER AN ALYZED SALARY BENCHMARK DATA DRAWN FROM PAYSCALE ON-DEMEND AND THE HUMENTUM INGO ANNUAL SU RYEYS FOR US-BASED STAFF IN THE FIRST THREE LEVELS OF THE ORGANIZATION AND CREATED A CAREE R LADDER AND SALARY LEVELS FOR THE SAME, WITH ALL STAFF IN THE CATEGORY MAPPED TO THE RIGH T LEVEL. IN NOVEMBER 2019, THE CENTER ANALYZED SALARY BENCHMARKS PAYSCALE ON-DEMAND DATA F OR US-BASED ATTORNEYS AND CREATED A US ATTORNEY CAREER LADDER AND SALARY LEVEL, WITH ALL A TTORNEYS MAPPED TO FIT THE SALARY LEVELS. IN MAY 2020, THE CENTER ANALYZED SALARY BENCHMAR K DATA FROM THE BIRCHES GROUP INGO SURVEYS FOR SWITZERLAND, COLUMBIA & KENYA FOR ALL GLOBA L STAFF AND ADJUSTED SALARIES FOR POSITIONS THAT WERE FOUND TO BE BELOW BENCHMARK. IN ADDITION, THE CENTER CONDUCTS AN ANNUAL PERFORMANCE EVALUATION FOR ITS MANAGEMENT AND THE REST OF ITS STAFF. THE CENTER DISCLOSES TO ITS EXECUTIVE COMMITTEE THE COMPENSATION AND BENEFI TS OF MEMBERS OF SENIOR MANAGEMENT. ANNUALLY, THE BOARD OF DIRECTORS ALSO REVIEW THE PERFORMANCE OF THE INDIVIDUAL WHO IS SERVING AS BOTH PRESIDENT AND CEO. IT DELEGAT ES THE DECISION OF COMPENSATION OF THE ENDARD MEETS WITH THE PERFSIDENT AND CEO. IT DELEGAT ES THE DECISION OF COMPENSATION OF THE BOARD MEETS WITH THE PERSIDENT AND CEO. IT DELEGAT EXCEUTIVE COMMITTEE, THE CHAIRMAN THE BOARD MEETS WITH THE PE

Return Explanation

FORM 990, Upon request, THE ORGANIZATION WILL MAKE AVAILABLE ONLY THOSE DOCUMENTS REQUIRED TO BE DIS CLOSED UNDER THE PUBLIC INSPECTION LAWS. In addition, the center's financial statements ar SECTION C, LINE 19:

990 Schedule O, Supplemental Information Return Explanation Reference

FROM 990, the process has not changed from prior year.
PART XII,

LINE 2C:

Return Explanation
Reference

FORM 990 DESCRIPTION:RECRUITMENT AND TEMP. AGENCIES TOTAL FEES:855121
PART IX
LINE 11G

Return Explanation
Reference

DESCRIPTION: INTERNATIONAL PARTNERS TOTAL FEES: 74489

990 Schedule O, Supplemental Information

FORM 990

PART IX LINE 11G

Return Explanation
Reference

LINE 11G

FORM 990 DESCRIPTION:OTHER PROFESSIONAL FEES TOTAL FEES:3106781
PART IX